

**Medicare**<sub>Rx</sub>  
Prescription Drug Coverage

# Medicare Advantage Cost Plans and Demonstrations

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## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Ada	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Ada	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Ada	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ada	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Ada	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Ada	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Ada	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Ada	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ada	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Ada	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Ada	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Ada	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Ada	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•
Ada	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Ada	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Ada	SecureHorizons	MedicareComplete Choice Plan 1 (H1303-001)	Local PPO	\$0.00	\$0.00	\$0	Enhanced		•
Ada	SecureHorizons	MedicareComplete Choice Plan 2 (H1303-003)	Local PPO *	\$0.00					
Ada	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ada	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Ada	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Ada	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Ada	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Ada	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Ada	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Ada	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Ada	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Ada	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Ada	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Ada	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Ada	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Ada	WellCare	Duet (H1340-004)	PFFS *	\$0.00					
Ada	WellCare	Freedom (H1340-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Ada	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Ada	WellCare	Summit (H1340-008)	PFFS	\$140.90	\$16.20	\$0	Enhanced		•
Adams	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Adams	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Adams	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Adams	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Adams	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Adams	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Adams	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Adams	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Adams	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Adams	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Adams	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Adams	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Adams	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Adams	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Bannock	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Bannock	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bannock	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Bannock	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Bannock	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Bannock	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Bannock	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bannock	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Bannock	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Bannock	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Bannock	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Bannock	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Bannock	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bannock	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Bannock	WellCare	Duet (H1340-004)	PFFS *	\$0.00					
Bannock	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Bannock	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Bear Lake	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Bear Lake	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bear Lake	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bear Lake	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Bear Lake	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Bear Lake	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Bear Lake	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Bear Lake	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Bear Lake	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bear Lake	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Bear Lake	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Bear Lake	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Bear Lake	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Bear Lake	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Bear Lake	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Bear Lake	WellCare	Summit (H1340-008)	PFFS	\$140.90	\$16.20	\$0	Enhanced		•
Benewah	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Benewah	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-007)	Local HMO *	\$82.00					
Benewah	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-002)	Local HMO	\$123.00	\$25.80	\$0	Enhanced		•
Benewah	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Benewah	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Benewah	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Benewah	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Benewah	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Benewah	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Benewah	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Benewah	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Benewah	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Benewah	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Benewah	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Benewah	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Bingham	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Bingham	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Bingham	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bingham	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bingham	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Bingham	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Bingham	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Bingham	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•
Bingham	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•

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\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Bingham	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Bingham	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Bingham	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Bingham	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Bingham	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Bingham	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Bingham	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bingham	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Bingham	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Bingham	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Bingham	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Bingham	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Bingham	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Bingham	WellCare	Summit (H1340-009)	PFFS	\$161.00	\$33.20	\$0	Enhanced		•
Blaine	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Blaine	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Blaine	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Blaine	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Blaine	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Blaine	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Blaine	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Blaine	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Blaine	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Blaine	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Blaine	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Blaine	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Blaine	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Blaine	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Blaine	WellCare	Concert (H1340-013)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Blaine	WellCare	Summit (H1340-006)	PFFS	\$91.00	\$0.00	\$0	Enhanced		•
Boise	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Boise	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Boise	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boise	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Boise	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Boise	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Boise	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Boise	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boise	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Boise	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Boise	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Boise	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Boise	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boise	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Boise	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 100 (H5435-016)	PFFS *	\$99.00					
Boise	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Boise	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Boise	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Boise	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					

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Boise	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Boise	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Boise	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Boise	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Boise	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Boise	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Bonner	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Bonner	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bonner	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-005)	Local PPO *	\$30.00					
Bonner	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-002)	Local PPO	\$56.00	\$26.70	\$265	Basic		•
Bonner	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-007)	Local HMO *	\$82.00					
Bonner	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-002)	Local HMO	\$123.00	\$25.80	\$0	Enhanced		•
Bonner	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Bonner	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Bonner	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Bonner	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Bonner	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Bonner	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Bonner	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Bonner	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Bonner	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Bonner	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Bonner	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Bonner	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bonner	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Bonner	WellCare	Duet (H1340-004)	PFFS *	\$0.00					
Bonner	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Bonner	WellCare	Summit (H1340-010)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
Bonneville	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Bonneville	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Bonneville	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Bonneville	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Bonneville	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Bonneville	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Bonneville	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Bonneville	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Bonneville	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Bonneville	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•
Bonneville	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Bonneville	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Bonneville	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Bonneville	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Bonneville	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Bonneville	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Boundary	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Boundary	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Boundary	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Boundary	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-007)	Local HMO *	\$82.00					
Boundary	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-002)	Local HMO	\$123.00	\$25.80	\$0	Enhanced		•
Boundary	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Boundary	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Boundary	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Boundary	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Boundary	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Boundary	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Boundary	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Boundary	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Boundary	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Boundary	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Boundary	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Boundary	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Boundary	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Boundary	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Boundary	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Boundary	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Boundary	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Boundary	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Boundary	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Boundary	WellCare	Summit (H1340-009)	PFFS	\$161.00	\$33.20	\$0	Enhanced		•
Butte	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Butte	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Butte	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Butte	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Butte	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Butte	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Butte	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Butte	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Butte	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Camas	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Camas	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Camas	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Camas	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Camas	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Camas	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Camas	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Camas	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Camas	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Camas	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Canyon	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Canyon	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Canyon	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Canyon	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Canyon	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Canyon	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Canyon	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Canyon	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Canyon	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Canyon	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Canyon	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Canyon	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Canyon	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•
Canyon	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Canyon	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Canyon	SecureHorizons	MedicareComplete Choice Plan 1 (H1303-001)	Local PPO	\$0.00	\$0.00	\$0	Enhanced		•
Canyon	SecureHorizons	MedicareComplete Choice Plan 2 (H1303-003)	Local PPO *	\$0.00					
Canyon	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•



## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Canyon	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Canyon	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Canyon	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Canyon	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Canyon	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Canyon	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Canyon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Canyon	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Canyon	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Canyon	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Canyon	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Canyon	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Canyon	WellCare	Duet (H1340-004)	PFFS *	\$0.00					
Canyon	WellCare	Freedom (H1340-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Canyon	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Canyon	WellCare	Summit (H1340-008)	PFFS	\$140.90	\$16.20	\$0	Enhanced		•
Caribou	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Caribou	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Caribou	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Caribou	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Caribou	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Caribou	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Caribou	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Caribou	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Caribou	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Caribou	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Caribou	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Caribou	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Caribou	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Caribou	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Caribou	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Cassia	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Cassia	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Cassia	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Cassia	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Cassia	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Cassia	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Cassia	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Cassia	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Cassia	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Cassia	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Cassia	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Cassia	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Cassia	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Cassia	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Cassia	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Cassia	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Cassia	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Cassia	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Cassia	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Cassia	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Cassia	WellCare	Concert (H1340-013)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Cassia	WellCare	Summit (H1340-006)	PFFS	\$91.00	\$0.00	\$0	Enhanced		•
Clark	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Clark	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Clark	Aetna Medicare	Aetna Medicare Open Plan (H5736-002)	PFFS	\$80.00	\$21.80	\$265	Basic		
Clark	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Clark	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Clark	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Clark	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Clark	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Clark	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Clark	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Clark	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Clark	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Clark	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Clark	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Clark	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Clark	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Clark	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Clark	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Clearwater	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Clearwater	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Clearwater	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Clearwater	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Clearwater	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Clearwater	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Clearwater	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Clearwater	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Clearwater	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Clearwater	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Clearwater	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Clearwater	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Custer	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Custer	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Custer	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Custer	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Custer	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Custer	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Custer	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Custer	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Custer	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Custer	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Custer	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Custer	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Custer	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Elmore	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Elmore	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Elmore	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Elmore	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Elmore	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Elmore	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Elmore	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					



## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Elmore	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Elmore	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Elmore	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Elmore	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Elmore	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Franklin	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Franklin	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Franklin	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Franklin	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Franklin	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Franklin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Franklin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Franklin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Franklin	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Franklin	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Franklin	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Franklin	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Franklin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Franklin	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Franklin	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Franklin	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Franklin	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Franklin	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Franklin	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Franklin	WellCare	Summit (H1340-009)	PFFS	\$161.00	\$33.20	\$0	Enhanced		•
Fremont	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Fremont	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Fremont	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Fremont	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Fremont	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Fremont	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Fremont	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Fremont	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Fremont	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Fremont	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Fremont	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Gem	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Gem	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Gem	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Gem	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Gem	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Gem	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Gem	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Gem	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Gem	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Gem	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Gem	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Gem	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Gem	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Gem	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Gem	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Rx Plan 55 (H5435-014)	PFFS	\$10.30	\$10.30	\$265	Basic		

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Gem	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 100 (H5435-016)	PFFS *	\$99.00					
Gem	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Gem	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Gem	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Gem	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Gem	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Gem	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Gem	WellCare	Concert (H1340-013)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Gem	WellCare	Summit (H1340-007)	PFFS	\$121.00	\$0.00	\$0	Enhanced		•
Gooding	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Gooding	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Gooding	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Gooding	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Gooding	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Gooding	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Gooding	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Gooding	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Gooding	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Idaho	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Idaho	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Idaho	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Idaho	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Idaho	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Idaho	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Idaho	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Idaho	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Idaho	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Idaho	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Idaho	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Idaho	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Jefferson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Jefferson	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Jefferson	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Jefferson	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Jefferson	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Jefferson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Jefferson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Jefferson	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Jefferson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Jefferson	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Jerome	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Jerome	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Jerome	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Jerome	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Jerome	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Jerome	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Jerome	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Jerome	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Jerome	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Jerome	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Jerome	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Jerome	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Jerome	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Jerome	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Jerome	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Jerome	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Jerome	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Jerome	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Jerome	WellCare	Freedom (H1340-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Jerome	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Jerome	WellCare	Summit (H1340-008)	PFFS	\$140.90	\$16.20	\$0	Enhanced		•
Kootenai	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Kootenai	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Kootenai	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-005)	Local PPO *	\$30.00					
Kootenai	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-002)	Local PPO	\$56.00	\$26.70	\$265	Basic		•
Kootenai	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-007)	Local HMO *	\$82.00					
Kootenai	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-002)	Local HMO	\$123.00	\$25.80	\$0	Enhanced		•
Kootenai	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Kootenai	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Kootenai	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Kootenai	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Kootenai	Regence BlueShield Of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Kootenai	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Kootenai	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•
Kootenai	Regence BlueShield Of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Kootenai	Regence BlueShield Of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Kootenai	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Kootenai	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Kootenai	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Kootenai	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Kootenai	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Kootenai	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Latah	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Latah	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Latah	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Latah	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Latah	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Latah	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Latah	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Latah	Regence BlueShield Of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Latah	Regence BlueShield Of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Latah	Regence BlueShield Of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Latah	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Latah	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Latah	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Latah	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Latah	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Latah	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Latah	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Latah	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Latah	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Latah	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Latah	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Latah	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Latah	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Latah	WellCare	Summit (H1340-010)	PFFS	\$181.00	\$43.10	\$0	Enhanced		•
Lemhi	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Lemhi	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lemhi	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Lemhi	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Lemhi	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Lemhi	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Lemhi	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Lemhi	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Lemhi	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lemhi	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Lemhi	WellCare	Concert (H1340-013)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lemhi	WellCare	Summit (H1340-006)	PFFS	\$91.00	\$0.00	\$0	Enhanced		•
Lewis	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lewis	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Lewis	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Lewis	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Lewis	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Lewis	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Lewis	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Lewis	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Lewis	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Lewis	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Lewis	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Lewis	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lewis	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Lincoln	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Lincoln	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lincoln	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Lincoln	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Lincoln	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Lincoln	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Lincoln	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Lincoln	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Lincoln	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Lincoln	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Lincoln	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Lincoln	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Lincoln	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Lincoln	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Lincoln	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Madison	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Madison	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Madison	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Madison	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Madison	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Madison	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Madison	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Madison	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Madison	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Madison	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Madison	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Madison	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Madison	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Madison	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Madison	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Madison	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Madison	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Madison	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Madison	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Madison	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Minidoka	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Minidoka	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Minidoka	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Minidoka	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Minidoka	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Minidoka	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Minidoka	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Minidoka	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Minidoka	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Minidoka	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Minidoka	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Minidoka	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Minidoka	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Minidoka	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Minidoka	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Minidoka	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Minidoka	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Minidoka	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Minidoka	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Minidoka	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Minidoka	WellCare	Freedom (H1340-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Minidoka	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Minidoka	WellCare	Summit (H1340-007)	PFFS	\$121.00	\$0.00	\$0	Enhanced		•
Nez Perce	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Nez Perce	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Nez Perce	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Nez Perce	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Nez Perce	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Nez Perce	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Nez Perce	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Nez Perce	Regence BlueShield Of Idaho	MedAdvantage (H1304-001)	Local PPO *	\$78.00					
Nez Perce	Regence BlueShield Of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Nez Perce	Regence BlueShield Of Idaho	MedAdvantage + Rx (H1304-002)	Local PPO	\$105.50	\$27.40	\$265	Basic		•
Nez Perce	Regence BlueShield Of Idaho	MedAdvantage + Rx Enhanced (H1304-004)	Local PPO	\$114.50	\$36.40	\$0	Enhanced	Generics	•
Nez Perce	Regence BlueShield Of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Nez Perce	Regence BlueShield Of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Nez Perce	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Nez Perce	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Nez Perce	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Nez Perce	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Nez Perce	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•



## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Nez Perce	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Nez Perce	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Nez Perce	WellCare	Summit (H1340-011)	PFFS	\$211.00	\$48.60	\$0	Enhanced		•
Oneida	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Oneida	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Oneida	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Oneida	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Oneida	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Oneida	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Oneida	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Oneida	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Oneida	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Oneida	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Oneida	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Oneida	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Owyhee	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Owyhee	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Owyhee	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Owyhee	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Owyhee	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Owyhee	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Owyhee	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Owyhee	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Owyhee	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Owyhee	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Owyhee	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Owyhee	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Owyhee	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Owyhee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	\$0.00					
Owyhee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Owyhee	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Owyhee	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Owyhee	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Owyhee	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Owyhee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Owyhee	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Owyhee	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Owyhee	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Owyhee	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Owyhee	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Owyhee	WellCare	Freedom (H1340-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Owyhee	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Owyhee	WellCare	Summit (H1340-008)	PFFS	\$140.90	\$16.20	\$0	Enhanced		•
Payette	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Payette	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Payette	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Payette	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Payette	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Payette	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Payette	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Payette	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Payette	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•



## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Payette	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Payette	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Payette	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Payette	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Payette	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Payette	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Payette	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Payette	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Payette	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Payette	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Payette	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Power	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Power	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Power	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Power	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Power	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Power	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Power	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Power	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Power	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Power	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Power	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	\$0.00					
Power	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Power	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Power	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	\$81.40					
Power	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	\$149.20					
Power	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Power	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Power	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Power	Unicare Life & Health Ins. Company	SecurityChoice Classic (H0540-001)	PFFS *	\$0.00					
Power	Unicare Life & Health Ins. Company	SecurityChoice Plus (H0540-020)	PFFS	\$11.00	\$11.00	\$0	Enhanced		•
Power	Unicare Life & Health Ins. Company	SecurityChoice Enhanced (H0540-010)	PFFS *	\$25.00					
Power	Unicare Life & Health Ins. Company	SecurityChoice Enhanced Plus (H0540-032)	PFFS	\$56.00	\$28.70	\$0	Enhanced	Generics	•
Shoshone	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Shoshone	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-007)	Local HMO *	\$82.00					
Shoshone	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-002)	Local HMO	\$123.00	\$25.80	\$0	Enhanced		•
Shoshone	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Shoshone	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Shoshone	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Shoshone	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Shoshone	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Shoshone	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Shoshone	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Shoshone	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Shoshone	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Shoshone	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Shoshone	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Teton	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Teton	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Teton	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Teton	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Teton	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Teton	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Teton	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Teton	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Teton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Teton	UniCare	Save Well - Plan II (H7289-002)	MSA *	\$0.00					
Twin Falls	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	\$0.00					
Twin Falls	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	\$98.00					
Twin Falls	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Twin Falls	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Twin Falls	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Twin Falls	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Twin Falls	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Twin Falls	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	\$0.00					
Twin Falls	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Premier 300 (H5435-008)	PFFS *	\$99.00					
Twin Falls	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Twin Falls	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	\$53.10					
Twin Falls	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	\$121.20					
Twin Falls	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Twin Falls	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Twin Falls	UniCare	Save Well - Plan I (H7289-001)	MSA *	\$0.00					
Twin Falls	WellCare	Duet (H1340-004)	PFFS *	\$0.00					
Twin Falls	WellCare	Concert (H1340-015)	PFFS	\$80.90	\$41.70	\$0	Enhanced		•
Twin Falls	WellCare	Summit (H1340-009)	PFFS	\$161.00	\$33.20	\$0	Enhanced		•
Valley	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Valley	Humana Insurance Company	Humana Gold Choice PFFS H1804-149 (H1804-149)	PFFS	\$69.00	\$11.30	\$265	Basic		
Valley	Humana Insurance Company	Humana Gold Choice PFFS H1804-066 (H1804-066)	PFFS	\$79.00	\$21.20	\$0	Enhanced		•
Valley	Humana Insurance Company	Humana Gold Choice PFFS H1804-197 (H1804-197)	PFFS	\$99.00	\$22.20	\$0	Enhanced		•
Valley	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Valley	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Valley	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Valley	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Valley	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Valley	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					
Valley	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Valley	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Washington	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	\$0.00					
Washington	Blue Cross Of Idaho Hlth Services Inc	Flexi Blue (H5862-001)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Washington	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-004)	Local PPO *	\$20.00					
Washington	Blue Cross Of Idaho Hlth Services Inc	Secure Blue (H1302-001)	Local PPO	\$45.00	\$26.30	\$265	Basic		•
Washington	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-006)	Local HMO *	\$46.00					
Washington	Blue Cross Of Idaho Hlth Services Inc	True Blue (H1350-001)	Local HMO	\$93.00	\$25.40	\$0	Enhanced	Generics	•
Washington	Humana Insurance Company	Humana Gold Choice PFFS H1804-022 (H1804-022)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Washington	Humana Insurance Company	Humana Gold Choice PFFS H1804-196 (H1804-196)	PFFS	\$20.00	\$20.00	\$0	Enhanced		•
Washington	Regence BlueShield of Idaho	HealthSense 65 Classic (H1349-010)	Cost *	\$89.00					
Washington	Regence BlueShield of Idaho	HealthSense 65 Basic (H1349-001)	Cost *	\$123.00					
Washington	Regence BlueShield of Idaho	HealthSense 65 Plus (H1349-006)	Cost *	\$143.00					
Washington	SecureHorizons	SecureHorizons MedicareDirect Rx Plan 51 (H2408-011)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Washington	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	\$0.00					
Washington	Sierra Optima	Sierra Optima Select (H4449-011)	PFFS *	\$0.00					
Washington	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	\$218.20					
Washington	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	\$9.00					

## Idaho 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

\* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Washington	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	\$28.70	\$28.70	\$100	Enhanced		•
Washington	UniCare	Save Well - Plan III (H7289-003)	MSA *	\$0.00					
Washington	WellCare	Freedom (H1340-012)	PFFS	\$0.00	\$0.00	\$0	Enhanced		•
Washington	WellCare	Concert (H1340-014)	PFFS	\$41.00	\$3.30	\$0	Enhanced		•
Washington	WellCare	Summit (H1340-007)	PFFS	\$121.00	\$0.00	\$0	Enhanced		•